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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/586,414	07/19/2006	Rustom S. Kanga	2156-301A	3134
7590	07/28/2009		EXAMINER	
John L Cordani Carmody and Torrance P O Box 1110 50 Leavenworth Street Waterbury, CT 06721-1110			HAMILTON, CYNTHIA	
			ART UNIT	PAPER NUMBER
			1795	
			MAIL DATE	
			07/28/2009	DELIVERY MODE
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Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.



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Board of Patent Appeals and Interferences

JOHN L CORDANI
CARMODY AND TORRANCE
P. O. BOX 1110
50 LEAVENWORTH STREET
WATERBURY, CT 06721-1110

Appeal No: 2009-006927
Appellant: Rustom S. Kanga
Application No: 10/586,414
Hearing Room: B
Hearing Docket: A
Hearing Date: Tuesday, September 15, 2009
Hearing Time: 09:00 AM
Location: Madison Building - East Wing
600 Dulany Street, 9th Floor
Alexandria, Virginia 22313-1450

NOTICE OF HEARING
CONFIRMATION REQUIRED WITHIN TWENTY-ONE DAYS

Your attention is directed to 37 CFR § 41.47. The above identified appeal will be heard by the Board of Patent Appeals and Interferences on the date indicated. Hearings will commence at the time set and as soon as the argument in one appeal is concluded, the succeeding appeal will be taken up. The time allowed for argument is twenty minutes unless additional time is requested and permitted before the argument is commenced. If there are any inquiries, please contact the Clerk of the Board at 571-272-9797.

The application involved in this appeal has been published. Accordingly, the hearing in this appeal is open to the public.

CONFIRMATION OR WAIVER OF THE HEARING IS REQUIRED. This form must be completed below and facsimile transmitted to both: (1) the USPTO Central fax number (official copy), and (2) the Board of Patent Appeals and Interferences fax number (courtesy copy) within TWENTY-ONE (21) DAYS from the mailing date of this notice indicating confirmation or waiver of the hearing. A copy of this notice may be alternately filed by mail if facsimile is not available.

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In all communications relating to this appeal, please identify the appeal by its number.

CHECK ONE: HEARING ATTENDANCE CONFIRMED HEARING ATTENDANCE WAIVED

Signature of Attorney/Agent/Appellant

Date

Registration No.

Names of other visitors expected to accompany counsel: _____
For information on visitor access to hearing rooms and security procedures at the USPTO Alexandria Campus, see
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